

Off

FINANCIAL STATEMENT	
IN UNITED STATES <input type="checkbox"/> MAGISTRATE <input type="checkbox"/> DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)	LOCATION NUMBER
IN THE CASE OF <u>USA</u> v.s. <u>ALEXOPOLOUS</u>	FOR <u>NORTHERN DISTRICT OF IL</u> AT <u>CHICAGO</u>

PERSON REPRESENTED (Show your full name) <u>MARCOS TORRES</u>	1 <input type="checkbox"/> Defendant - Adult 2 <input type="checkbox"/> Defendant - Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input checked="" type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other	DOCKET NUMBERS Magistrate District Court <u>08CR 215</u> Court of Appeals <div style="font-size: 2em; font-weight: bold; text-align: center;">FILED</div>
CHARGE/OFFENSE (describe if applicable & check box →) <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <u>18 USC 1524 for D.H.</u> <u>FRCrP 15(a)(2) for witness (18 USC 3144)</u> <u>MATERIAL WITNESS</u>		

ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: _____ IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment: _____ How much did you earn per month? \$ _____
	OTHER INCOME	If married is your Spouse employed? <u>DNA</u> <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____
	CASH	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES <u>RECEIVED \$200 week - house painting - odd jobs until</u>
	PROPERTY	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____ Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <u>0</u>	List persons you actually support and your relationship to them
	DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>	APARTMENT OR HOME: <u>Rent</u>	Creditors	Total Debt <u>\$ 280.00</u>

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

3-21-08

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

MARCOS TORRES